

**Power of humanity**

33rd International Conference  
of the Red Cross and Red Crescent

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**33rd INTERNATIONAL CONFERENCE  
OF THE RED CROSS AND RED CRESCENT**

Geneva, Switzerland  
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**Addressing mental health and psychosocial needs  
of people affected by armed conflicts, natural disasters  
and other emergencies**

**Resolution**

## RESOLUTION

### **Addressing mental health and psychosocial needs of people affected by armed conflicts, natural disasters and other emergencies**

The 33rd International Conference of the Red Cross and Red Crescent,

*expressing* deep concern about the unmet mental health and psychosocial needs of people affected by armed conflicts, natural disasters and other emergencies, including the needs of migrants, refugees and internally displaced persons, *stressing* that mental health and psychosocial needs increase extensively as a result of these situations and that pre-existing conditions may resurface or be exacerbated, and *underscoring* the urgent demand to increase efforts to respond to them by means of prevention, promotion, protection and assistance,

*recognizing* that mental health and psychosocial well-being are critical to the survival, recovery and daily functioning of people affected by armed conflicts, natural disasters and other emergencies, to their enjoyment of human rights and fundamental freedoms and to their access to protection and assistance,

*recalling* the Constitution of the World Health Organization, which recognizes that health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity; and further recognizes that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition,

*recognizing* that early and appropriate mental health and psychosocial support is important to prevent distress from developing into more severe conditions and that children and youth face particular risks if their mental health and psychosocial needs are not addressed early, and *acknowledging* that most people show resilience and do not develop mental health conditions provided they have access to basic services and family- and community-level resources,

*recognizing also* that unmet mental health and psychosocial needs have far-reaching and long-term negative human, social and economic impacts, which affect individuals, communities and society as a whole, and that meeting these needs, in particular in armed conflicts, natural disasters and other emergencies, is critical to achieving universal health coverage and the Sustainable Development Goals,

*recalling* Resolution 3, “Sexual and gender-based violence: Joint action on prevention and response” of the 32nd International Conference of the Red Cross and Red Crescent (International Conference), which calls upon States and National Red Cross and Red Crescent Societies (National Societies) to make every feasible effort to ensure, insofar as possible, that survivors of sexual violence and, where appropriate, gender-based violence have unimpeded and ongoing access to psychological and psychosocial support,

*recognizing* that the mental health and psychosocial well-being of volunteers and staff responding to humanitarian needs is often affected as they are exposed to risks and potentially traumatic events and work under stressful conditions, and that the safety, security, health and well-being of staff and volunteers are vital to the provision of sustainable quality services, and *recalling* the relevant recommendations and commitments set out in Resolution 4, “Health Care in Danger: Continuing to protect the delivery of health care together”, and Resolution 5, “The safety and security of humanitarian volunteers”, of the 32nd International Conference,

*recognizing also* that factors such as, but not limited to, pre-existing mental health conditions, substance use and addictive behaviours, age, gender, disability, state of health, socio-economic status, ethnicity, legal status, deprivation of liberty, displacement and exposure to violence can further increase risk and impact needs and vulnerability and that diversity factors should be considered in order to ensure effective access to, and the culturally sensitive provision of, mental health and psychosocial support services for all people affected,

*reaffirming* the fundamental premise and commitment to “do no harm” by taking into account the perspectives of people with lived experience, and by promoting applicable standards of care, ethical and professional guidelines and evidence-informed, participatory and culturally sensitive approaches that protect and promote mental health and psychosocial well-being,

*recognizing* that the stigma and often hidden nature of mental health and psychosocial needs are key challenges that need to be addressed with medium- and long-term strategies, as appropriate to the context, at individual, family, community and societal levels,

*affirming* that the existing international legal frameworks, including international humanitarian law and international human rights law, as applicable, provide for protections that may be relevant to mental health and psychosocial well-being, and *recognizing* that respect for those protections may significantly contribute to addressing the challenges in preventing and meeting mental health and psychosocial needs,

*affirming also* that States have the primary responsibility to address the humanitarian needs, including mental health and psychosocial needs, of people affected by armed conflicts, natural disasters and other emergencies, in accordance with the applicable legal frameworks,

*recognizing* that the components of the International Red Cross and Red Crescent Movement (Movement) have important complementary and supportive roles in addressing the mental health and psychosocial needs of affected people, including the role of National Societies as auxiliaries to the public authorities in the humanitarian field, as reflected in the Geneva Conventions of 1949, their Additional Protocols of 1977, the Statutes of the Movement and resolutions of the International Conference,

*acknowledging* the important and diverse work carried out by the components of the Movement to address mental health and psychosocial needs, including basic psychosocial support through to specialized mental health care provided in close proximity to the affected people and their communities, *welcoming* the Movement’s efforts to strengthen its response to these needs, and *taking note* of the Movement’s new policy on addressing mental health and psychosocial needs adopted by the 2019 Council of Delegates,

*recalling* all relevant resolutions adopted by the International Conference and the United Nations (UN) and other commitments addressing mental health and psychosocial needs, including Resolution 29 of the 25th International Conference, *expressing appreciation* for existing relevant work and initiatives by the World Health Organization and other relevant agencies and parts of the UN system, regional organizations, States, humanitarian organizations and other relevant actors aimed at addressing mental health and psychosocial needs,

*underlining* the complementary character of the work of the Movement and the International Conference in relation to the above work and initiatives, and *emphasizing* the importance of coordinating the response with other local and international actors and building on local needs and available resources,

1. *calls upon* States, National Societies, the International Federation of Red Cross and Red Crescent Societies (IFRC) and the International Committee of the Red Cross

(ICRC) to increase efforts to ensure early and sustained access to mental health and psychosocial support services by people affected by armed conflicts, natural disasters and other emergencies;

2. *also calls upon* States, National Societies, the IFRC and the ICRC to invest in local and community-based action, embedded in local and national services, on a longer-term basis to prevent, prepare for and respond to mental health and psychosocial needs, including by strengthening local and community resilience and the capacities of volunteers;
3. *encourages* States and National Societies to enhance their cooperation to address these needs, as appropriate, building on the National Societies' often unique humanitarian access to affected people and auxiliary role to the public authorities in the humanitarian field;
4. *calls upon* States, National Societies, the IFRC and the ICRC, in accordance with their respective roles, mandates and capacities, to ensure that mental health and psychosocial support responses include psychosocial, psychological and specialized mental health care;
5. *also calls upon* States and the components of the Movement to integrate mental health and psychosocial support into all activities addressing humanitarian needs, including prevention and protection, and ensure that mental health and psychosocial support and responses addressing other humanitarian needs, such as shelter, food, livelihoods, education and support to separated families and families of the missing, are mutually reinforcing;
6. *calls upon* States to ensure that mental health and psychosocial support is an integral component in domestic and international emergency response systems, including disaster laws, preparedness plans and emergency response coordination mechanisms, and *calls upon* the components of the Movement, particularly National Societies, to support this effort in accordance with their respective mandates;
7. *calls upon* States and the components of the Movement to take action to address stigma, exclusion and discrimination related to mental health and psychosocial needs through approaches that respect the dignity and reinforce the participation of affected people, in particular persons with lived experiences, in a context-specific, culturally and faith-sensitive way;
8. *encourages* States to work to strengthen the quality and capacity of the workforce, including volunteers, responding to the mental health and psychosocial needs of people affected by armed conflicts, natural disasters and other emergencies, in close coordination and cooperation with the components of the Movement;
9. *calls upon* States and the components of the Movement to take measures to protect and promote the mental health and psychosocial well-being of staff and volunteers who are responding to humanitarian needs across all sectors, equipping them with the necessary skills, tools and supervision to cope with stressful situations and responding to their specific mental health and psychosocial needs.